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REPORT

ON

INEBRIATE ASYLUMS.

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BY

C. McDERMONT,

OF DAYTON, OHIO.



EXTRACTED FROM THE
TRANSACTIONS OF THE AMERICAN MEDICAL ASSOCIATION.

PHILADELPHIA:
COLLINS, PRINTER, 705 JAYNE STREET.
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REPORT ON INEBRIATE ASYLUMS.

THE Committee on Inebriate Asylums respectfully submit the following Report:—

The various measures hitherto adopted for the suppression of drunkenness, have utterly failed to remedy the evil in its worst form. It is not to be denied that the friends of the temperance cause have accomplished a large amount of good; through their instrumentality thousands have doubtless been impressed with the perilous tendency of a moderate indulgence in alcoholic stimulants, and, in consequence, have wholly abstained from their use; by their efforts the bottle has been excluded formally from the family board and the pale of the church, and the once popular notion that whisky is an essential element of friendly and social communion, has been by them abolished. Now and then they have succeeded in reclaiming a confirmed drunkard, but the triumphs of this kind were very few, and so often blasted by subsequent relapses, that the radical, permanent reform of an inebriate is now generally looked upon as almost miraculous. Their failure to reach this unfortunate class is due to the fact that the true remedy was not applied.

This remedy consists in separating the drunkard from his intoxicating draught, which may be done in two ways. 1st. *By an absolute prohibition of the sale and manufacture of ardent spirits; or 2d. By placing the inebriate in an asylum where he shall be delivered from the temptation to drink—guarded from the possibility of indulgence, and be subjected to such medical and moral treatment as will effectually overcome his morbid appetite.*

In the present state of society, we look upon the cure of the inebriate by the method first indicated, as wholly impracticable. If we consult the sentiments of the masses, we will find the advocates of such a beneficent enactment far inferior in wealth, numbers, and political influence, to those whom avarice and selfishness would

array in opposition to it. The second method is the only one available; by this method, it is proposed to furnish a place of refuge to which the unfortunate victim of intemperance may fly for safety and aid, and in which he may remain securely until his ungovernable passion for drink shall be overcome, and he is restored to health, reason, and self-control.

It may be truly asserted that every other method for restoring the inebriate has been tested and found inadequate. If we review the labors of the temperance party for the last thirty years, we cannot fail to be amazed at the immensity of their work. What diversified schemes for securing the desired reform! Look at the vast machinery of their organization! There is scarce a town or district in the civilized world that has not been made the theatre of their systematic operations. Consider all they have undertaken by popular association, by political parties, by the administration of pledges, by private appeals. Look at the host of powerful advocates that have been and are still enlisted in the service. What zeal and union of action by men of all parties, sects, and opinions! The church, through her ministers and laity, has spoken with one earnest and solemn voice on the side of temperance; the medical profession has laid open to the world the baneful effects of alcohol on the human system, and the frightful destruction of human life occasioned by intemperance. The officers of our criminal courts have exposed the magnitude of this giant evil. Nations have enacted laws for its suppression, but all these means have failed to reach the confirmed inebriate, and they always will fail because, as stated, they do not present the true remedy for the evil.

It is an error to suppose that the inebriate is a mere moral delinquent, who can be reclaimed by moral suasion. Possibly this may be true of him in the early stage of his career, but it is not true of the confirmed drunkard. He has a diseased stomach which arguments cannot cure, a distemper of the brain which all the moral forces in the universe cannot eradicate. He has lost the power of self-control, and might as well attempt to check the pulsations of his heart as refrain from gratifying his thirst for stimulants, so long as the means of gratification are within his reach. With him inebriety is a disease, having, like other diseases, its causes, its peculiar symptoms, and its morbid anatomy.

Within the past few years the physiological and pathological characters of inebriety have been carefully investigated in this country and Europe, and the results of these investigations demon-

strate, beyond a doubt, that inebriety is a disease—*constitutional* and *hereditary*.

The distinguished philosopher and philanthropist, Dr. J. W. Francis, speaking of the morbid appearance of drunkenness, says: "Every fibre, every tissue of the body is subjected to its all pervading influence; no part, however, demonstrates its sad ravages more frequently than the brain; the knife of the dissector shows the changes here to be many and most afflicting; inflammation, adhesions, and effusions are the commonest forms of the altered state; the poison itself is often actually found in the ventricles of the brain, and upon the bony covering being removed, the exhalation of alcohol is strongly perceptible. Apply a lighted taper, and combustion takes place. I have seen the brain thus on fire twelve hours after the death of the inebriate. As a medical witness, I have in numerous cases testified to the truth of these pathological facts, derived from dissections, many of which I have performed."

Dr. Turner, the founder of the Inebriate Asylum now in course of erection at Binghamton, N. Y., in reference to the hereditary character of this disease, says: "This is shown by the mortality of children born of inebriate parents, in whom are found the same appearances of ulceration of the stomach, liver, and intestinal canal, with the indurated condition of the brain, as we find in chronic cases produced by five or ten years of excess in the use of alcoholic stimulants."

Another striking evidence of the hereditary character of this disease is observed in those persons who, after drinking one glass of liquor, and sometimes even after tasting it, lose their self-restraint, and fall into immoderate indulgence.

In a recent work on insanity by Dr. Wood, of London, the learned author makes the following declaration: "Instances are sufficiently familiar, and several have occurred within my own personal knowledge, when the father, having died at an early age from intemperance, has left a son to be brought up by those who have suffered from his excesses, and have therefore the strongest motive to prevent if possible, a repetition of such misery. Every pains has been taken to enforce sobriety; and yet, notwithstanding all precaution, the habits of the father have become the habits of the son, who, having never seen him from infancy, could not have adopted them from imitation. Everything was done to encourage habits of temperance, but to no purpose. The *seeds* of the disease had begun to germinate; a blind impulse has led the doomed individual by suc-

cessive and rapid stages along the same course that was fatal to his father, and which, ere long, terminates his own destruction. This does not only occur among the lower orders, where it may be supposed education has done little towards the cultivation of the mind, and the government of the passions and propensities; for it is observed in those whose education and position in society afforded the best guarantee that their conduct would be under the guidance of reason."

Insanity and idiocy are prominent among the diseases entailed by inebriates on their offspring. Nearly one-half of all the insanity and idiocy of the country is referable to this cause.

Delirium tremens, the most dreadful disease that afflicts our race, is one of the forms of inebriety; and it is a remarkable fact that this form of the disease is seldom witnessed except in those descended from intemperate ancestors. Dr. Bruce, who records this observation, also mentions the case of a workman who had an attack of delirium tremens from inhaling the vapor of alcohol in the establishment where he was employed. The man's father had died with the disease.

Dr. Barrow, in his work on Insanity, says: "This affection (delirium tremens) has been known to be induced in persons of sober habits whose daily occupation exposed them to the fumes of alcohol." Dr. Turner also mentions a case of the kind occurring under his notice. A singular case illustrative of this pathological law occurred in my own practice some years ago. The patient had been harassed with ague, and to prevent its return, he took every morning a wineglass of bitters, composed of Peruvian bark in whiskey; in three months he had an attack of delirium tremens which proved fatal. His wife and neighbors had never seen him intoxicated.

In maintaining that inebriety is a disease, it is not implied that any and every indulgence in ardent spirits is productive of, or associated with, derangement of the physical structure. A wise Providence has so formed our bodies that they are capable of resisting morbid influences to a very great degree. A person may be exposed for years to a malarious climate, and yet, if the protective forces of his system are sufficiently active, he will escape any morbid impression, and even when such an impression is made the recuperative powers of Nature are ever active, and ordinarily suffice to repair the injury. On the same principle, a healthy individual may drink brandy once or one hundred times without producing disease. We know men who have been in the habit of

drinking for twenty or thirty years, and who sometimes drink to excess, without as yet any apparent impairment of health. It is only when the appetite for stimulants becomes irresistible, that we have positive evidences of disease. Up to this point, he may be classed with the moderate drinker or voluntary drunkard; but, having once passed this boundary, he descends to the grade of the inebriate. To note the precise time when this point is reached, is not necessary. The dividing line between health and disease cannot be designated in any case; it is as imperceptible as the line that separates night from day.

The inebriate, then, whether rendered such by a hereditary proclivity or voluntary self-abuse, is to be regarded as the most pitiable of all God's unfortunate creatures. He is no longer influenced by motives or arguments; he may listen to the reasonings of the moralist and the warnings of the divine, but in the hour of temptation all is forgotten. He is not a proper subject of parental discipline or the civil police of society; the sacred obligations of the family relation, the more sacred obligations of a Christian profession; even the solemn oath of reformation recorded in his lucid intervals are all utterly powerless for restraint, when the paroxysm of dipsomania is upon him.

His disease is not located in the heart, or the will, or the conscience, but in the *stomach, brain, and nervous system*, and hence the inefficacy of all *moral* prescriptions, and the propriety and necessity of consigning him to the *doctor* for treatment.

The morbid condition of the system which constitutes inebriety, is always attended with perversions of the intellectual functions. The mind itself being imperishable, is not liable to disease, but its functions are often strangely perverted in consequence of derangement in the physical organs through which it operates. In inebriety, these are not so far perverted but that the patient knows and feels he is doing wrong; nevertheless his morbid thirst for drink is so intense that the gratification of it becomes absolutely irresistible. He may be compared to the ague patient, who knows and dreads the approaching chill; he is anxious to avoid the "shake;" he determines to resist it; he nerves himself for the struggle, but in vain. In both cases there is a morbid necessity of nature that must be obeyed in spite of all effort and volition to the contrary. As the disease advances, the moral and intellectual faculties become more and more disordered, until at length the victim becomes un-

conscious of the depravity of his course, and yields himself a willing slave to the poisonous cup.

We believe an asylum as necessary for the inebriate as for the lunatic. Every consideration in favor of the one may be urged with equal force in favor of the other.

Like the lunatic, he is incompetent to manage his affairs; he is a curse to his family and friends; he beggars those who are dependent upon him; fills the land with crime, and injures, by his pernicious example, all who come within the sphere of his influence. In certain forms of the disease, he will plunge a dagger into the bosom that nursed his infancy, into the heart that lavished its best love upon him; even his children, the darling objects of his sober affections, are often the unlucky objects of his insane fury.

The prison, the gallows, the insane asylum, or suicide, often terminates his career. If he escape these, look at the degradation into which he is plunged. He may have occupied the loftiest place in society. The brilliancy of his genius may have commanded universal admiration. Senates may have been chained by his eloquence; the bar or the pulpit may have numbered him among its brightest ornaments. He may have been loved and honored by all, and yet to what depth of degradation is he hurled when the demon of intemperance obtains the mastery over him. His fellowship is then with the vile and sottish. His name is a byword and a reproach; those who once courted his companionship now shun him. His body is diseased; his mind is stupefied; his feelings are brutalized; his conscience is dead; his existence is a public calamity, his death a public relief.

There are those who deny that inebriety is a disease. Maintaining that a man becomes a drunkard in consequence of his own wilful and wicked indulgence, and admitting that this indulgence long persisted in produces an *ungovernable* passion for stimulants, they discover nothing in the condition of a drunkard to excite a charitable view of his case. They regard his loss of self-control only as the evidence of a darker depravity, a deeper criminality. We deem it a sufficient answer to this narrow view of the case, to state that nine-tenths of the insanity in our asylums has been induced by voluntary vicious indulgence of one sort or other. Surely, no one would dare to say that, on this account, our sympathies shall be withheld from the lunatic, and that he should be excluded from the benefits of a charitable and remedial system. It is not in Christianity to allow a man to perish, although he

may have been the author of his own downfall; it is godlike, and, therefore, the noblest mission of philanthropy to alleviate the sufferings of an erring brother, and, if possible, redeem him from ruin.

The doctrine that inebriety is a disease is not new. It was held and promulgated by the celebrated Dr. Rush, of Philadelphia. He regarded the confirmed inebriate as irresponsible in the eyes of the law, and urged the establishment of asylums for their restraint and treatment. He alleged that they were "as fit subjects of hospital treatment as any other class of madman." "They are," he adds, "monomaniacs—the subjects of physical disease located in the brain. At first their drinking is the fruit of moral depravity, but when long indulgence in this vice has produced disease of the brain, then is their drinking the result of insanity."

Having satisfied ourselves that inebriety is a disease, we propose in the next place to inquire into its curability, and on this point we are not left to doubtful conjecture. Experience has proved that a radical and permanent cure may be achieved in a large majority of cases, by placing the drunkard in an asylum where he shall be fully under the control and treatment of a proper medical supervisor. Dr. Turner, in his very able letter to Gov. Morgan, says: "It is no longer problematical that inebriety can be controlled, treated, and cured by an asylum, experience in insane asylums, and in private practice, demonstrates this fact beyond a doubt." He also contends "that the institution will have more elements for the treatment of the inebriate than any lunatic asylum has for the treatment of the insane. Experience and medical observation have already verified this fact. It is obvious to every mind that the removal of an insane patient to an asylum does not remove the exciting cause of insanity. It may require months before the cause of mental derangement can be determined. But in the case of inebriety, the removal of the patient to this asylum removes at once the exciting cause of his malady, and places him at once in the condition of cure."

The late Dr. Woodward of the Worcester Insane Asylum, says: "From the many hundreds I have treated, I am convinced that nine out of ten could be radically cured in an inebriate asylum." He cites the following case to illustrate the efficacy of this method of treatment in the most aggravated cases. "I once had a person under my care who had used spirituous liquors in great quantities, and for a long period of time. He was placed in circumstances

where it was impossible to obtain it. Naturally vigorous and stout-hearted, his constitution seemed to retain considerable energy. It was concluded in consultation, by those who now had the care of this unhappy man, to take away all his stimulants at once and watch him carefully, and to administer to his wants all that nutrition of the most grateful kind which should alleviate in any measure the tempest of suffering which we supposed he must inevitably meet. His sufferings were unparalleled in intensity and duration. The hardness of his natural ferocity was melted into childishness, and in the agony of his torments, with torrents of tears flowing over his cheeks, he would beg with all the eloquence which famished nature could call forth, that one dram, one glass should be afforded him. I shall never forget the horror of this scene. I shall never forget the heart-rending appeals made to me in my daily rounds. I shall never forget how far were my feelings from torturing or ridiculing this wretched sufferer, whose every nerve was in torment, whose stomach, rejecting the bland nutrition administered, called loudly and imperiously for that bewitching draught which, if the cause of all his horror, was, he well knew, the only means of relief from his present agony; but no alcoholic stimulant was afforded him. His symptoms were watched with great care, and those medicines administered from time to time which his situation required. In a few weeks he improved, in a few months he recruited, in two years he was well, in better health than he had enjoyed for many years. He now acknowledges that we saved him from ignominy and an untimely grave."

The honorable and distinguished Dr. Shae, of the Royal Edinburgh Asylum, and Dr. Peddie, of the same place, have expressed themselves strongly in favor of the asylum method of treating inebriates. The latter says: "I consider it as much the duty of the government to control and medically treat the dipsomaniac as it is to stay the hand of the homicide or the suicide in their insane impulses."

It is needless further to cite individual authorities in favor of the inebriate asylum. Every medical man who has expressed an opinion on the subject, and all the medical journals in the country, are in favor of this system. Fourteen hundred of the leading physicians of New York united, a short while ago, in a petition to the legislature of their State for an appropriation to aid in completing the Binghamton Asylum. The following extract from the petition will indicate the view which every enlightened physician must

entertain in respect to the inebriate asylum. "As practitioners, we have long felt the necessity of having an asylum where the inebriate could be medically and morally treated with sufficient restraint to control the patient. Without such an institution, the physician has been compelled to turn from his patient, discouraged, disheartened, and defeated, and the victim of this painful malady, be he rich or poor, high or low, must alike find a drunkard's death and a drunkard's grave; with this institution we can save hundreds who are now crowding our insane asylums, inundating our courts, dying in our prisons, and perishing in our streets.

"We are not inclined to urge the argument of economy in establishing the inebriate asylum (though we have every reason to believe it will be a self-supporting institution), when 55 per cent. of all our insanity, and 68 per cent. of all our idiocy, spring directly or indirectly from inebriety alone. We regard it a matter of duty so sacred, that until discharged we have no right as a moral and enlightened people to finish our great internal improvements, erect monuments in commemoration of battles, public works to art, or even *costly* temples to God.

"We maintain that our whole lives spent in our professional duties, and as private citizens, go to prove that, in the present state of society, there is no institution so much needed as an asylum for inebriates. Medical science demands it; civilization demands it; morality demands it; Christianity demands it; everything sacred and good in our country demands it."

The Onondaga Medical Society in 1857 also presented a memorial to the legislature of New York, setting forth in strong terms the need of an inebriate asylum, and recommending the institution at Binghamton to a share of the public money.

The State Medical Society of New York in the same year unanimously adopted a resolution recommending the inebriate asylum to the favor and support of the legislature and the public.

A large number of the prominent citizens of Maryland have organized in behalf of this measure, and are sanguine in their expectation of being able to build an inebriate asylum at no distant day.

The cause is rapidly advancing and winning friends among the enlightened and philanthropic everywhere. We firmly believe that in less than twenty years every State in our Union will boast of one or more of these beneficent institutions.

Last year, Hon. S. P. Chase, then Governor of Ohio, in his message to the Assembly, urged the duty of the State to provide an

asylum for the control and treatment of inebriates. The sentiments he has recorded on this subject are eminently wise and politic, and we hope soon to see them reflected by the Governors of every State in the confederacy.

One of the most interesting and convincing proofs of the importance of such asylums is found in the Report of the Board of Managers of the Binghamton Asylum. Dr. Turner (to whom I am indebted for many of the facts in this report) says: "Before the walls of the first story were completed, there were 2800 applicants for admission. Among these were 28 clergymen, 36 physicians, 42 lawyers, 12 editors, 3 judges, 4 army and 3 naval officers, 179 merchants, 55 farmers, 515 mechanics, 410 women who are from the high walks of life; of the vocation of the remaining 1200 applicants we have no knowledge."

While the condition of the inebriate is in itself sufficient to arouse our sympathies and efforts in his behalf, there are other incitements equally potent and affecting; I allude to the sufferings of his family and friends. The poor inebriate, no matter how degraded he may become, has ever some hearts that cling to him amid all his misery and wretchedness—the mother, the sister, the daughter: and, more than all, the wife—the *true* wife—she never abandons the husband of her heart—the father of her children. All others may despise and shun him; he may sink to the lowest depths of infamy and brutishness; he may bring her and her children to poverty and shame, still the heaven-born principle of conjugal attachment remains steadfast. He may treat her rudely and with violence; "he may break, he may shatter the vase if he will," yet the fragrance of her pure love will encircle his obscured manhood, and, like a precious balm, preserve it from utter extinction until redeemed by the special visitation of Providence, or the instrumentality of the inebriate asylum.

The devotion of a sorrowing heart-broken woman to a drunken husband is one of the strangest spectacles in the universe, and who is there that has not witnessed such devotion? The vine clinging to the storm-lashed oak is a fitting, though faint, representation of the affectionate tenacity with which the fond wife clings to her unworthy husband amid the storms and convulsions of his drunken career.

There are at this time at least a million of hearts in our country that are hourly wrung with anguish by the intemperance of some near relative or friend. Who among us are strangers to its disas-

trous effects! Alas! how few are not called to mourn over these effects in our own family or friendly circles?

The most careful estimates show that there are not less than 500,000 drunkards in the United States, and that, of these, 30,000 fall annually into a drunkard's grave. In view of these appalling facts, it becomes our imperative duty to aid in any measure that is adapted to remove the evil. As commissioned guardians of the public health, we cannot permit these 30,000 to perish amongst us when the means of rescuing them are within our reach.

The inebriate asylum is one of the noblest conceptions of the medical mind, and I am happy and confident in the belief that the medical profession will take the lead in promoting this, as they have done in almost every benevolent and reformatory enterprise of the past. The fact that 1400 of our brethren in New York have subscribed \$12,000 to aid in erecting the asylum at Binghamton, is a good guarantee that our profession everywhere will exert themselves to secure for the unhappy inebriate the blessings of a special institution. This asylum is the great desideratum of the present age. It is not in the power of philanthropy to devise a scheme more fraught with benefits to the suffering race; through its instrumentality thousands of our fellow citizens will be rescued from ruin, and themselves and families restored to happiness and respectability. In all coming generations, the inebriate asylum is destined to be prominent among the charitable and remedial institutions of every civilized nation. It will stand as an ark of safety, a house of refuge, to which the perishing drunkard may fly for deliverance, and from which he shall come forth in newness of life to pronounce blessings on the names of Turner, Butler, Francis, and all others who, through faith in the curability of the inebriate, shall nobly exert themselves for his salvation.

Your Committee recommends the adoption of the resolutions referred to him, and asks to be discharged.

C. McDERMONT.

At the meeting of the Association, in Louisville, Dr. McDermont submitted the following resolutions:—

"*Whereas*, A vast proportion of the disease and misery that afflict our race is caused by the excessive use of intoxicating liquors; and *whereas*, in the opinion of this Association, the evils of intoxication can be most effectually remedied by the establish-

ment of Inebriate Asylums, wherein the victims of intemperance may be subjected to such restraints and treatment as shall effect a thorough reformation in their habits: therefore

"Resolved, That this Association recommend the establishment of Inebriate Asylums in the various States of the Union.

"Resolved, That the State and County Medical Societies, and all members of the medical profession, be requested to unite in diffusing among the people a better knowledge and appreciation of the important benefits that would be conferred upon society by the establishment of such asylums throughout the various sections of our country."

The above was referred to the mover as a special committee, with the request that he would report thereon at the next meeting of the Association.



